



SDRN: Scottish Diabetes Research Network

Waist-Hip Ratio

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Clinical S.O.P. No.: 7

Version 1.0

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DOCUMENT HISTORY

Version number	Detail of purpose / change	Author / edited by	Date edited
1.0	New SOP	Shona Brearley	

1. Introduction

Waist-to-hip ratio looks at the proportion of fat stored on the body around the waist and hips. It is a simple but useful measure of fat distribution. Most people store their body fat in two distinct ways: around their middle (apple shape) and around their hips (pear shape).

Having an apple shape (carrying extra weight around the stomach) is riskier for your health than having a pear shape (carrying extra weight around your hips or thighs). This is because body shape and health risk are linked. If you have more weight around your waist you have a greater risk of lifestyle related diseases such as heart disease and diabetes than those with weight around their hips.

2. Objectives

To describe the procedure for the measurement of waist and hips and to promote uniformity within the SDRN in accordance with ICH GCP guidelines.

3. Responsibilities

Research nurses must be trained in the hip/waist measurement, using the centimetres equipment supplied in accordance with ICH GCP guidelines. The Research Nurse must consider if a chaperone is required for this procedure.

4. Equipment

- Measure tape (for waist and hip measurements)
- Wooden metre rule (for calibration purposes)

5. General points

- Inform patient of need for procedure and obtain verbal consent.
- Waist and hip measurements should be recorded in the CRF
- The recording of these measurements should be accurate and follow ICH GCP guidelines.
 1. Use black ballpoint pen
 2. Print all entries legibly

6. Procedure

Waist circumference

- The patient should be standing and clothing should be removed from around waist and hips. They do not necessarily need to undress, but can for example undo trousers and drop them to the top of thighs or raise skirts up.
- Instruct the patient to stand with feet pointing forwards and approximately 25-30cm apart. Their weight should be evenly distributed.
- Feel for the lower rib margin and make a mark with a water-soluble marker pen.
- Palpate the iliac crest in the mid-axillary line and mark on the skin surface.
- Measure the distance between the two marks (rib cage and iliac crest) and make a distinct mark between them.
- Repeat this process on the opposite side of the body (this improves the reproducibility of the measurement).
- Instruct the patient to breath out gently whilst the measurement is taken.
- Apply the tape horizontally around the subject's body, line the tape over the two marks and ensure it is sitting evenly. Slot the end of the tape into the designated hold. Adjust the tape so that it is sitting comfortably. The tapes have an inbuilt tension device, so no other adjustment needs to be made after the tape has been correctly positioned.
- Record the measurement in centimetres and document in CRF.

Hip circumference

- Following on from the waist measurement, ensure the participant remains in the same position, and breathing out gently.
- With the tape measure the point yielding the maximum circumference. As before the tape should sit horizontally around the body, without a tilt.
- Record the measurement in centimetres and enter in the CRF.
- The patients can now re-adjust clothing.